5 510(k) Summary

JUN 3 0 2014

Submitter:	ARKRAY Factory, Inc.	
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Contact Person:	Lonna M. DenDooven	
	Regulatory Affairs Specialist	
	ARKRAY Factory USA, Inc.	
	5182 West 76 th Street	
	Edina, Minnesota, USA 55439	
	Phone: (952) 646-3175	
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Date Prepared:	June 30, 2013	
Trade Name:	GLUCOCARD 01 Blood Glucose Monitoring System	
	ReliOn Confirm Blood Glucose Monitoring System	
Classification:	Glucose test system, 21 CFR 862.1345; Class II	
Product Codes:	CGA, NBW	
Predicate Device:	GLUCOCARD 01 Blood Glucose Monitoring System (K073416)	
Device Description:	The GLUCOCARD 01 Blood Glucose Monitoring System and ReliOn	
	Confirm Blood Glucose Monitoring System consist of a meter, test	
	strips, and control solution for use as an aid to monitor the effectiveness	
	of diabetes control.	
Intended Use:	The GLUCOCARD 01 Blood Glucose Monitoring System is intended for the quantitative measurement of glucose in fresh capillary whole	
	blood samples drawn from the fingertips, or palm. Testing is done	
	outside the body (In Vitro diagnostic use). It is indicated for use at	
	home (over the counter [OTC]) by persons with diabetes as an aid to	
	monitor the effectiveness of diabetes control. It is not intended for the	
	diagnosis of or screening for diabetes mellitus, and is not intended for	
	use on neonates. It is intended for single patient use and should not be	
	shared with other individuals.	
	The ReliOn Confirm Blood Glucose Monitoring System is intended for	
	the quantitative measurement of glucose in fresh capillary whole blood	
	samples drawn from the fingertips, or palm. Testing is done outside the	
	body (In Vitro diagnostic use). It is indicated for use at home (over the	
	counter [OTC]) by persons with diabetes as an aid to monitor the	
	effectiveness of diabetes control. It is not intended for the diagnosis of	
	or screening for diabetes mellitus, and is not intended for use on	
	neonates. It is intended for single patient use and should not be shared with other individuals.	
<u> </u>	with other individuals.	

Substantial	The new GLUCOCARD 01 Blood Glucose Monitoring System is	
Equivalence Basis:	identical to the GLUCOCARD 01 (k073416, cleared by FDA June 13, 2008) except that the manufacturing process for the GLUCOCARD 01 SENSOR Blood Glucose Test Strip has been modified to allow for more efficient production. The fundamental scientific technology of the modified test strip has not changed. The modifications to the test strip did not require any changes to meter hardware, software or other components of the test system.	
Functional and Safety Testing:	A clinical study was conducted with persons with diabetes to evaluate system accuracy and to assess ease of use.	
	Analytical verification testing was performed to evaluate precision, dynamic range/linearity, interfering substances, sample volume, stability and the effect of altitude, hematocrit, and environmental conditions.	
Conclusion:	Labeling, bench testing results and clinical testing results support the Indications for Use and the claim of substantial equivalence to the predicate.	



Food and Drug Administration 10903 New Hampshire Avenue Document Control Center – WO66-G609 Silver Spring, MD 20993-0002

ARKRAY FACTORY INC. LONNA DENDOOVEN REGULATORY AFFAIRS SPECIALIST 5198 WEST 76TH ST EDINA MN 55439

June 30, 2014

Re: K124021

Trade/Device Name: ARKRAY GLUCOCARDTM 01 Blood Glucose Monitoring System

ReliOn Confirm Blood Glucose Monitoring

Regulation Number: 21 CFR 862.1345 Regulation Name: Glucose test system

Regulatory Class: II

Product Code: NBW.CGA Dated: June 18, 2014 Received: June 19, 2014

Dear Ms. Lonna Dendooven:

We have reviewed your Section 510(k) premarket notification of intent to market the device referenced above and have determined the device is substantially equivalent (for the indications for use stated in the enclosure) to legally marketed predicate devices marketed in interstate commerce prior to May 28, 1976, the enactment date of the Medical Device Amendments, or to devices that have been reclassified in accordance with the provisions of the Federal Food, Drug, and Cosmetic Act (Act) that do not require approval of a premarket approval application (PMA). You may, therefore, market the device, subject to the general controls provisions of the Act. The general controls provisions of the Act include requirements for annual registration, listing of devices, good manufacturing practice, labeling, and prohibitions against misbranding and adulteration. Please note: CDRH does not evaluate information related to contract liability warranties. We remind you, however, that device labeling must be truthful and not misleading.

If your device is classified (see above) into either class II (Special Controls) or class III (PMA), it may be subject to additional controls. Existing major regulations affecting your device can be found in the Code of Federal Regulations. Title 21, Parts 800 to 898. In addition, FDA may publish further announcements concerning your device in the Federal Register.

Please be advised that FDA's issuance of a substantial equivalence determination does not mean that FDA has made a determination that your device complies with other requirements of the Act or any Federal statutes and regulations administered by other Federal agencies. You must comply with all the Act's requirements, including, but not limited to: registration and listing (21 CFR Part 807); labeling (21 CFR Parts 801 and 809): medical device reporting (reporting of medical device-related adverse events) (21 CFR 803): good manufacturing practice requirements as set forth in the quality systems (QS) regulation (21 CFR Part 820); and if applicable, the electronic product radiation control provisions (Sections 531-542 of the Act); 21 CFR 1000-1050.

If you desire specific advice for your device on our labeling regulations (21 CFR Parts 801 and 809), please contact the Division of Industry and Consumer Education at its toll-free number (800) 638 2041 or (301) 796-7100 or at its Internet address

http://www.fda.gov/MedicalDevices/ResourcesforYou/Industry/default.htm. Also, please note the regulation entitled, "Misbranding by reference to premarket notification" (21 CFR Part 807.97). For questions regarding the reporting of adverse events under the MDR regulation (21 CFR Part 803), please go to

http://www.fda.gov/MedicalDevices/Safety/ReportaProblem/default.htm for the CDRH's Office of Surveillance and Biometrics/Division of Postmarket Surveillance.

You may obtain other general information on your responsibilities under the Act from the Division of Industry and Consumer Education at its toll-free number (800) 638-2041 or (301) 796-7100 or at its Internet address

http://www.fda.gov/MedicalDevices/ResourcesforYou/Industry/default.htm.

Sincerely yours,

Katherine Serrano -S

For: Courtney H. Lias, Ph.D.

Director

Division of Chemistry and Toxicology Devices

Office of In Vitro Diagnostics and Radiological Health

Center for Devices and Radiological Health

Enclosure

DEPARTMENT OF HEALTH AND HUMAN SERVICES Food and Drug Administration

Indications for Use

Form Approved: OMB No. 0910-0120 Expiration Date: January 31, 2017 See PRA Statement below.

10(k) Number (if known) 124021
Device Name GLUCOCARD 01 Blood Glucose Monitoring System
Indications for Use (Describe) The GLUCOCARD 01 Blood Glucose Monitoring System is intended for the quantitative measurement of glucose in fresh capillary whole blood samples drawn from the fingertips, or palm. Testing is done outside the body (In Vitro diagnostic use). It is indicated for use at home by persons with diabetes as an aid to monitor the effectiveness of diabetes control. It is not intended for the diagnosis of or screening for diabetes mellitus, and is not intended for use on neonates. It is intended for single patient use and should not be shared with other individuals.
The GLUCOCARD 01 SENSOR Plus Blood Glucose Test Strips are intended to be used with the GLUCOCARD 01 Blood Glucose Meter for the quantitative measurement of glucose in fresh capillary whole blood samples drawn from the fingertips, or palm.
Type of Use (Select one or both, as applicable)
Prescription Use (Part 21 CFR 801 Subpart D) Subpart D) Voer-The-Counter Use (21 CFR 801 Subpart C)
PLEASE DO NOT WRITE BELOW THIS LINE - CONTINUE ON A SEPARATE PAGE IF NEEDED.
FOR FDA USE ONLY
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> Department of Health and Human Services Food and Drug Administration Office of Chief Information Officer Paperwork Reduction Act (PRA) Staff PRAStaff@fda.hhs.gov

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DEPARTMENT OF HEALTH AND HUMAN SERVICES Food and Drug Administration

Indications for Use

Form Approved: OMB No. 0910-0120 Expiration Date: January 31, 2017

See PRA Statement below.

510(k) Number <i>(if known)</i> k124021	
Device Name ReliOn Confirm Blood Glucose Monitoring System	
Indications for Use (Describe) The ReliOn Confirm Blood Glucose Monitoring System is intercapillary whole blood samples drawn from the fingertips, or pause). It is indicated for use at home by persons with diabetes as not intended for the diagnosis of or screening for diabetes mellifor single patient use and should not be shared with other indivi	Im. Testing is done outside the body (In Vitro diagnostic an aid to monitor the effectiveness of diabetes control. It is itus, and is not intended for use on neonates. It is intended
The ReliOn Confirm Plus Blood Glucose Test Strips are intend Meter for the quantitative measurement of glucose in fresh capipalm.	
Type of Use (Select one or both, as applicable)	
Prescription Use (Part 21 CFR 801 Subpart D)	Over-The-Counter Use (21 CFR 801 Subpart C)
PLEASE DO NOT WRITE BELOW THIS LINE - CO	ONTINUE ON A SEPARATE PAGE IF NEEDED.
FOR FDA U	<u> </u>
Concurrence of Center for Devices and Radiological Health (CDRH) (Signature)
Stayce Beck -S	

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